

1060 U.S. PTO
08/08/01

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Please type a plus sign (+) inside this box ☐

PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	
First Inventor	HOSKOTE, B. SUNDARESH
Title	FIRST AID HATS / FIRST AID CAP
Express Mail Label No.	

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
- ☒ Applicant claims small entity status.
See 37 CFR 1.27.
- ☐ Specification [Total Pages **22**]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **10**]
- ☐ Oath or Declaration [Total Pages **2**]
 - ☒ Newly executed (original or copy)
 - ☐ Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
 - ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patent:
Box Patent Application
Washington, DC 20231

- ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
- Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - ☐ Computer Readable Form (CRF)
 - Specification Sequence Listing on:
 - ☐ CD-ROM or CD-R (2 copies); or
 - ☐ paper
 - ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

- ☐ Assignment Papers (cover sheet & document(s))
- ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
- ☐ English Translation Document (if applicable)
- ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
- ☐ Preliminary Amendment
- ☐ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
- ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
- ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
- ☐ Other:

8. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No. **29,141,813**
Group Art Unit: **2900**

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)	or <input checked="" type="checkbox"/> Correspondence address below
Name	HOSKOTE, B. SUNDARESH	
Address	13501, CHAMPIONS WAY	
City	GERMANTOWN	State MD Zip Code 20874
Country	U. S. A	Telephone 301-916-4013 Fax 301-916-4065

Name (Print/Type)	HOSKOTE, B. SUNDARESH	Registration No. (Attorney/Agent)	NIL
Signature	H. B. Sundares	Date	08/03/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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OFFICE OF THE COMMISSIONER OF PATENT AND TRADEMARK OFFICE
AUG 08 2001

FEE TRANSMITTAL

for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) **490.00**

Complete if Known

Application Number	29/141,813
Filing Date	05/14/2001
First Named Inventor	HOSKOTE · B · SUNDARESH
Examiner Name	
Group Art Unit	2900
Attorney Docket No.	

METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																																																								
<p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number <input type="text"/></p> <p>Deposit Account Name <input type="text"/></p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>Payment Enclosed:</p> <p><input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>	<p>3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	HOSKOTE · B · SUNDARESH	Registration No. (Attorney/Agent)	Telephone 301-916-4013
Signature	H · B · Sundaresb	Date	08/03/01

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2001

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TOTAL AMOUNT OF PAYMENT (\$)

\$ 160.00

Complete if Known

Application Number	
Filing Date	
First Named Inventor	HOSKOTE . B . SUNDARESH
Examiner Name	
Group Art Unit	
Attorney Docket No.	

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☐ Check ☒ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	710	201	355	Utility filing fee	
106	320	206	160	Design filing fee	160.00
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$)

160.00

2. EXTRA CLAIM FEES

Total Claims		Extra Claims		Fee from below		Fee Paid	
Independent		-20** =		X			
Multiple Dependent		-3** =		X			

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$) NIL

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
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116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
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179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

NIL

SUBMITTED BY

Name (Print/Type) HOSKOTE . B . SUNDARESH

Registration No. (Attorney/Agent)

NIL

Complete (if applicable)

Telephone 301-916-4013

Signature

H. B. Sundaresh

Date

05/09/01

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Certificate of Mailing under 37 CFR 1.8

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**Assistant Commissioner for Patents
Washington, D.C. 20231**

on 05/10/01
Date

H. B. Sundaresh
Signature

HOSKOTE . B. SUNDARESH
Typed or printed name of person of signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

APPLICATION NOS : 29/141,813
FILLING DATE : 05/14/01
TITLE : FIRST AID HATS / CAPS
INVENTOR : HOSKOTE .B. SUNDARESH

From,

Hoskote.B.Sundaresh
891 , Clopper Rd, Apt B-2,
Gaithersburg, MD, 20878
U.S.A
Tel : 240-246-1570

To,

Attn : Ms Delora Dillard
Office of Initial Patent Examination
Washington DC,
U.S.A.
Fax Nos : 703-305-9822

Sub : Change of Address

Dear Madam,

I wish to bring to your kind attention that a request for change of address that I mailed to your office, several months ago, has not been noted in your, PALM DATABASE. I would greatly appreciate it, if you could note the new address as mentioned above, as soon as possible.

Old Address,

13501, Champions way,
Germantown, MD, 20874
U.S.A
Tel Nos : 301-916-4013

New Address,

891, Clopper Rd, Apt B-2,
Gaithersburg, MD, 20878.
U.S.A
Tel : 240-246-1570

Thanking you,

Yours Sincerely,

Hoskote.B.Sundaresh
10/01/02

111 321



09924075.080801

From,

Hoskote.B.Sundaresh

13501, Champions Way,

Germantown, MD, 20874

Tel : 301-916-4013

To,

Assistant Commissioner for Patents,

Box Patent Applications,

Washington DC ,

20231

REF : **APPLICANT** : **HOSKOTE . B . SUNDARESH**

APPLICATION NOS : **29 / 141, 813**

FILLING DATE : **05/14/2001**

TITLE : **First Aid Hats / First Aid Caps**

Dear Sir / Madam,

This filing is a **continuation of the original filing / application** filed on the 14th of May 2001. I wish to **file a utility application, in addition to a design application** already with you, so that I may get protection, for all aspects of the invention, including both the product and the process. I would like to claim priority for this filing, for a **UTILITY PATENT**, on the basis of my first filing. I am herewith enclosing , the appropriate fees for the same, and all the appropriate documents for it.

Thanking You,

Yours Sincerely,

H. B. Sundaresh

Hoskote. B . Sundaresh,

08/03/01



09924075.080801

LIST OF CONTENTS OF UTILITY PATENT APPLICATION

INVENTOR : HOSKOTE . B . SUNDARESH
APPLICATION NOS : 29 / 141, 813
FILING DATE : 05 / 14 / 01
TITLE : FIRST AID HATS / FIRST AID CAPS

1. COVERING LETTER : ONE PAGE
2. PTO / SB / 21 (TRANSMITTAL FORM) : ONE PAGE
3. PTO / SB / 17 (FEE TRANSMITTAL FORM) : ONE PAGE
4. PTO / SB / 01 (DECLARATIONS) : TWO PAGES
5. PTO / SB / 05 (UTILITY PATENT APPLICATION
TRANSMITTAL FORM) : ONE PAGE
6. CREDIT CARD PAYMENT
FORMS (AMT : \$ 490.00) : TWO COPIES
7. SMALL ENTITY STATUS LETTER : ONE PAGE
8. SPECIFICATIONS : 17 PAGES
9. CLAIMS : 5 PAGES
10. DRAWINGS : 10 PAGES
11. NOS OF FIGURES OF DRAWINGS : 16 FIGURES
12. DECLARATION (INCLUDED) : TWO PAGES

H.B. SUNDARESH

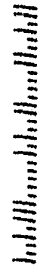
891 Clopper Rd, Apt B2

Gaithersburg, MD, 20878

TO,

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Washington DC 20231



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